



Internship Application

Office of Congresswoman Zoe Lofgren (CA-16)

DATE: _____

PERSONAL CONTACT INFORMATION

Name: _____

Home mailing address: _____

Home phone: _____

School: _____

School mailing address (*if different than home*): _____

School phone: _____

Cell phone: _____

E-mail: _____

Date of Birth: _____

Political Affiliation: _____

EDUCATION

High School: _____

Undergraduate Institution: _____

Academic Year: _____

Major/Minor: _____

GPA: _____

HONORS, AWARDS, or SCHOLARSHIPS: _____

COMPUTER EXPERIENCE: _____

EXTRA CURRICULAR ACTIVITIES or INTERESTS: _____

OFFICE APPLYING TO: _____ Washington, DC _____ San Jose, CA

INTERN SESSION: _____ Fall (September—December)

_____ Spring (January—May)

_____ Summer (June—August)

DATES AVAILABLE: _____ through _____

Internship length is flexible, and students on the quarter system should still feel free to apply.

WILL YOU RECEIVE ACADEMIC CREDIT FOR INTERNSHIP? _____ Yes _____ No

IF YES, THE NUMBER OF COURSE CREDITS YOU ANTICIPATE: _____

PROGRAM COORDINATOR: _____ PHONE: _____

PLEASE FAX OR MAIL THIS APPLICATION ALONG WITH THE FOLLOWING:

- Current resume
- One letter of recommendation
- One writing sample, detailing your interest in an internship with Congresswoman Lofgren.

**Please be advised that mail service to Capitol Hill is delayed due to current security measures. We strongly urge applicants to send their application via fax.*

***Please note there is no compensation for internships.*

Washington, DC Office:

Congresswoman Zoe Lofgren
Attn: Intern Coordinator
102 Cannon House Office Building
Washington, DC 20009

Fax: (202) 225-3336
Phone: (202) 225-3072

San Jose Office:

Congresswoman Zoe Lofgren
Attn: Intern Coordinator
635 North 1st Street, Suite B
San Jose, CA 95112

Fax: (408) 271-8713
Phone: (408) 271-8700